

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 29, 1999

Application or Docket Number

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	30 minus 20 =	* 10
INDEPENDENT CLAIMS	2 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY  
TYPE

OR

OTHER THAN  
SMALL ENTITY

RATE	FEES	RATE	FEES
	345.00	OR	690.00
X\$ 9=		OR	X\$18= 180
X39=		OR	X78=
+130=		OR	+260=
TOTAL		TOTAL	870

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 10	Minus	** 30
Independent	* 2	Minus	*** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X39=		X78=	
+130=		+260=	
TOTAL ADDITIONAL FEE		TOTAL ADDITIONAL FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE  
ADDITIONAL  
FEE

RATE  
ADDITIONAL  
FEE

X\$ 9=

X\$18=

X39=

X78=

+130=

+260=

TOTAL  
ADDITIONAL FEE

TOTAL  
ADDITIONAL FEE

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE  
ADDITIONAL  
FEE

RATE  
ADDITIONAL  
FEE

X\$ 9=

X\$18=

X39=

X78=

+130=

+260=

TOTAL  
ADDITIONAL FEE

TOTAL  
ADDITIONAL FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY  
It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: \_\_\_\_\_

### Total Fee Calculated

Fee Code	Fee	Fee Code	Fee	Fee	Fee	Fee	Fee
Sub/A				S-100		C-100	
Basic Filing Fee	100.00						
Total Claims > 20	100.00	30	10			150	
Independent Claims > 1	100.00	10					
Multi-Dep. Claim Present	100.00						
Surcharge	100.00					100	
English Translation	100						

### TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 1000.00

Less Filing Fees Submited = \$

BALANCE DUE = \$ 1000.00

Office of Initial Patent Examination